Based on Survey of Patients' Hospital Experiences (HCAHPS)

	Provider Number	Hospital Name	Address 1
100023		CITRUS MEMORIAL HOSPITAL	502 HIGHLAND BLVD
100049		HIGHLANDS REGIONAL MEDICAL CENTER	3600 S HIGHLANDS AVE
100062		MUNROE REGIONAL MEDICAL CENTER	1500 SW FIRST AVE
100212		OCALA REGIONAL MEDICAL CENTER	1431 SW FIRST AVE

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Based on Survey of Patients' Hospital Experiences (HCAHPS)

Address 2	Address 3	City	State
		INVERNESS	FL
		SEBRING	FL
		OCALA	FL
		OCALA	FL

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Based on Survey of Patients' Hospital Experiences (HCAHPS)

ZIP Code	County Name	Phone Number
34452	CITRUS	3527261551
33870	HIGHLANDS	8633856101
34474	MARION	3523517200
34478	MARION	3524011000

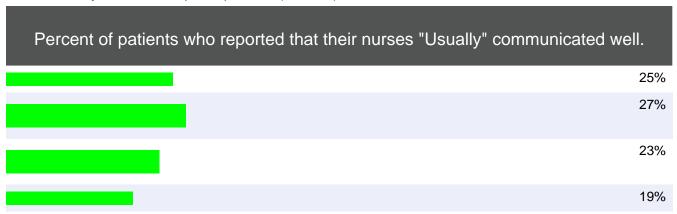
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Based on Survey of Patients' Hospital Experiences (HCAHPS)

Percent of patients who reported that their nurses "Sometimes" "Never" communicated well.	or
	7%
	9%
	6%
	9%

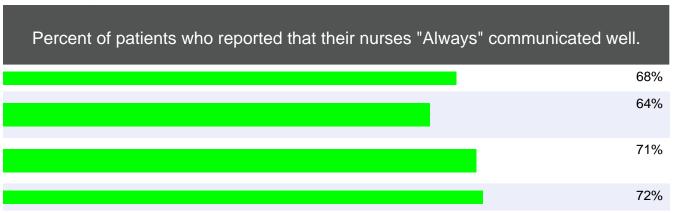
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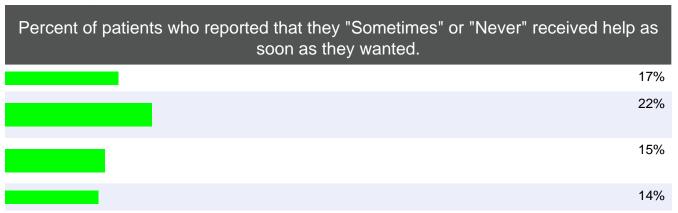
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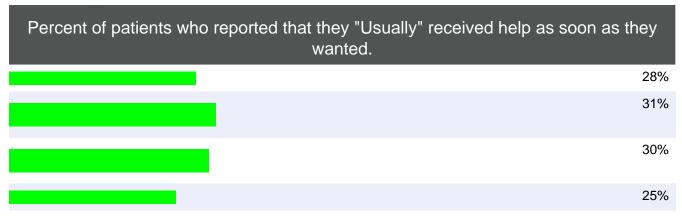
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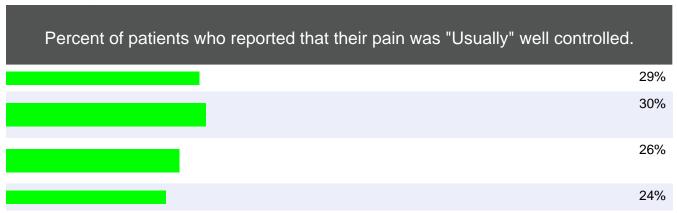
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Based on Survey of Patients' Hospital Experiences (HCAHPS)

Percent of patients who reported that their pain was "Sometimes" or "Never" well controlled.	
	11%
	11%
	8%
	8%

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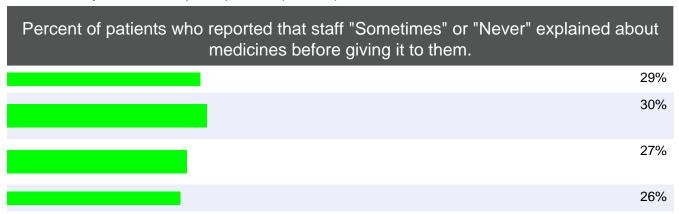
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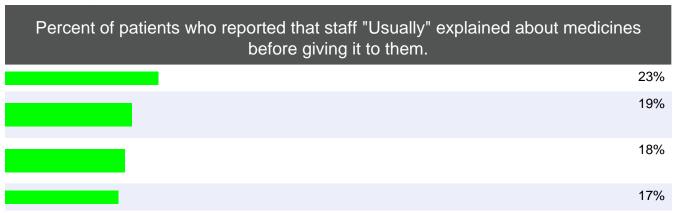
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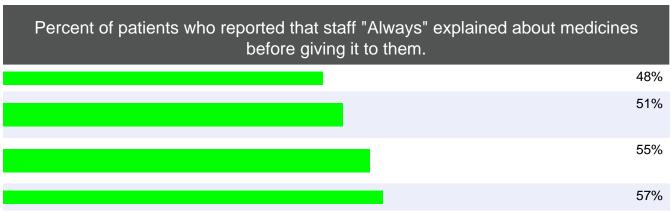
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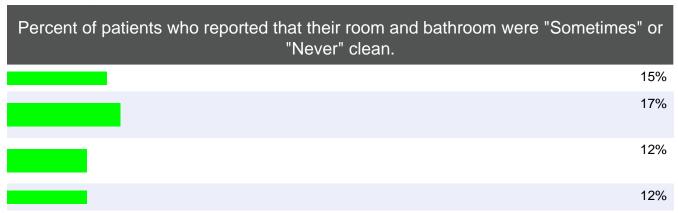
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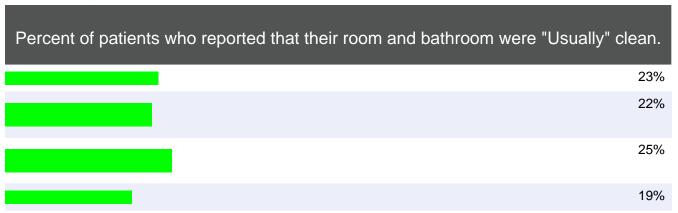
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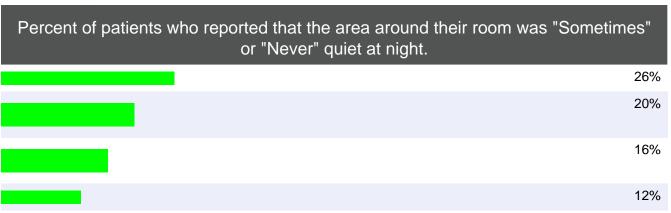
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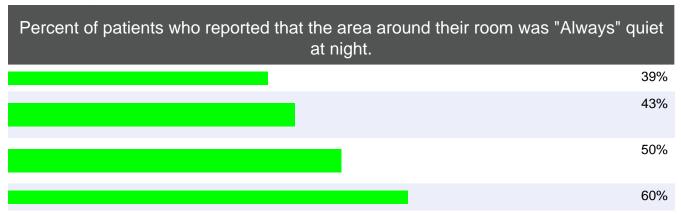
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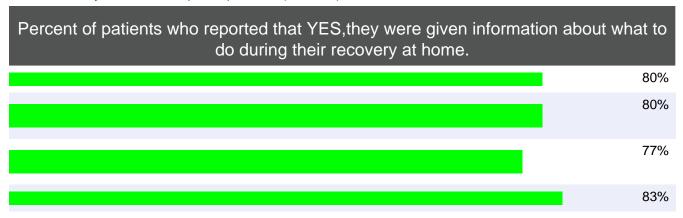
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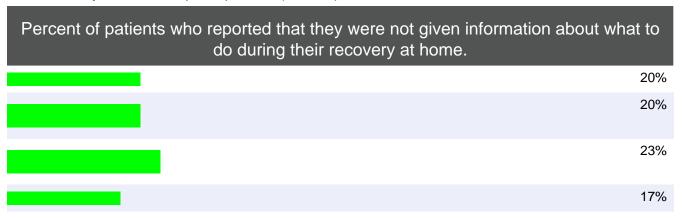
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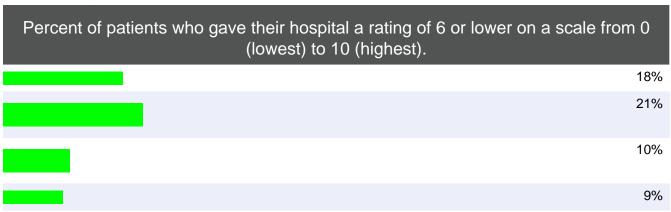
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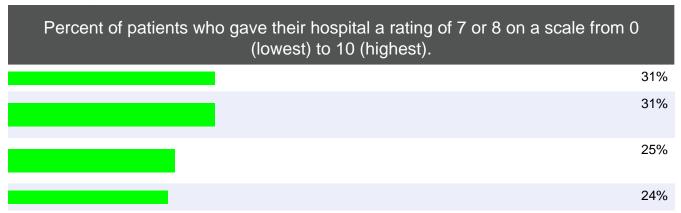
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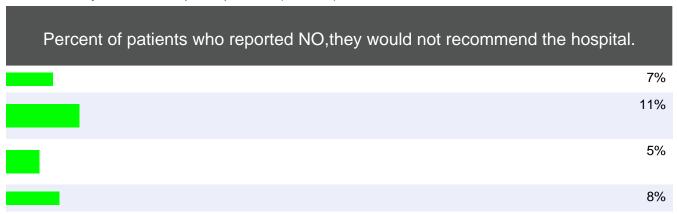
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	Number of Completed Surveys
300 or more	

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Based on Survey of Patients' Hospital Experiences (HCAHPS)

Survey Response Rate Percent	Hospital Footnote
43%	
33%	
37%	
32%	

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